CODE NO.

HAULER-OFFICE-FILE COP

Revised December 1974 STATE DEPARTMENT OF HEALTH SFUND RECORDS CTR HAULER OF WASTE (Must be filled by hauler) PRODUCER OF WASTE Must be filled by producer 999000562 ASBURY OIL CO. 13419 Halidale Ave., Gardena, California 90249 9-20-77 Time Phone: (213) 321-1392 State Liquid Waste Hauler's Registration No. (if applicable) No. of Loads or Trips Type of Process which Produced Wastes: Doberrels, 🗆 fletbed, 🗆 other (Examples: metal plating, equipment cleaning, oil drilling vacuum truck wastewater treatment, pickling bath, petroleum refining) The described waste was hauled by me to the disposal DESCRIPTION OF WASTE (Must be 相) by producer) facility named below and was accepted. Check type of westes: i certify (or declars) under penalty of perjury that the foregoing is true and correct. 1. Acid solution 6. D Tetraethyl lead sludge 11. Conteminated soll and sand SIGNATURE OF AUTHORIZED AGENT AND 2. Alkaline solution 12. Canner's waste 7. Chemical toilet wastes DISPOSER OF WASTE (Must be filled by dispose 3. Pesticides 13. 🔲 Latex waste 8. Tank bottom sediment 2425 So. Garfield Ave. 9. 🗖 011 Name (print or type): 4. Paint sludge 14. Mud and water Monterey Park, Calif. 91754 5. Solvent 10. Drilling mud 15. D Brine Site Address: The hauler above delivered the described waste to this disposal facility and it was an acceptable Other (Specify) meterial under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions. Components: (Examples: Hydrochtoric acid, lime; caustic sode, Concentration: phynolics, solvents (list), metals (list), Upper Lower ppm Quantity measured at site (if applicable): State fee (if any) organics (list), cyanide) Handling Method(s): recovery . ☐ treatment (specify): EXAMPLES: INCINERATION MEUTRALIZATION, PRECIPITATION disposel (specify): pond spreading landfill injection well Other (specify): If waste is held for disposal equipmers. Disposal Date: Hazardous Properties of Waste: certify (or declare) under penalty of perjury that the foregoing is true and correct. toxic " I flammable corrosive axplosive tons 🖥 (42 gal.) The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports. drums certons Containers: other_ Physical State: Special Handling Instructions (if any): The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable). I certify (or declare) under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF AUTHORIZED AGENT AN

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300. D.O.T. Proper Shipping Name